

BOROUGH OF BEVERLEY.



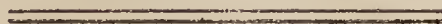
REPORT

OF THE

School Medical Officer

(H. L. MUNRO, M.D.),

For the Year 1920.



Beverley:

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*To the Chairman and Members of the Education Committee
of the Borough of Beverley.*

Mr. Chairman, Miss Elwell, and Gentlemen,

I beg to present to you my Eighth Annual Report as
School Medical Officer for the Borough.

The Report has been arranged in accordance with in-
structions issued by the Board of Education in December,
1920.

I am,

Your obedient Servant,

H. L. MUNRO, M.D.,

School Medical Officer.

February 23rd, 1921.

Annual Report of the School Medical Officer for the year 1920.

Staff.

The School Medical Officer is assisted by a School Nurse, who also acts as Health Visitor. Miss V. Heward, the School Nurse, was appointed in July, 1919.

A whole-time Lady Clerk has recently been appointed to carry out the clerical work of the department, which has increased very much of late years. This has enabled me to initiate fuller records of the work.

Co-ordination with other Health Services.

The Maternity and Child Welfare Centre is now in full working order, and any children under school age are always welcomed there. The staff of the Centre is the same as that of the School Medical Service.

There are no Nursery Schools in the Borough.

The School Medical Service in relation to Public Elementary Schools.

School Hygiene.

The number of elementary schools in the Borough is 10; three belong to the Town Council, three to St. Mary's Church, three to the Minster, and one to St. John's Roman Catholic Church.

No schools were closed during the year owing to infectious disease, and all the schools were regularly disinfected during the holidays by the Sanitary Inspector.

All the schools are provided with water from the Corporation Waterworks, and all have Water Closets.

Medical Inspection.

The visits of the Medical Officer are always paid after consulting the convenience of the Head Teacher, and an endeavour is made to disturb the school work as little as possible. A separate room is provided for the Inspections, and the School Nurse and Head Teacher are present at all examinations.

The schedule of the Board of Education has been adhered to as in former years, and the three age groups have been examined. The total number of children seen at the routine inspections was 762; 332 Entrants, 244 Intermediates, and 186 Leavers.

Of the Entrants 125 were below five years of age.

Findings of Medical Inspections.

(a) Uncleanliness.

29 children were found to be unclean, but in only 10 of these was the head at fault. There is a distinct improvement in the condition of the clothing of the children.

(b) Minor Ailments.

Malnutrition was observed in 30 cases, and 10 of these were referred for treatment. This is twice as many as last year, and would appear to have a definite relationship to the increased cost of living. The improvement noticed during the War has not been maintained.

The majority of cases of bronchitis were found amongst the younger children.

(c) Tonsils and Adenoids.

The number of children with marked enlargement of the tonsils is much the same as in former years. Only those with tonsils causing marked defects were referred for treatment, as in many cases opposition is advanced by parents to operation.

(d) Skin Diseases.

Impetigo and scabies have caused a very great amount of trouble during the year. At the routine inspections 3 cases of scabies and 12 of impetigo were discovered, whilst 24 cases of scabies and 195 of impetigo were seen at the Clinic. This is much more than last year, and has necessitated the exclusion of many children from school for varying periods.

(e) External Eye Diseases.

Blepharitis and conjunctivitis have been unusually common, and have been found mostly in debilitated children of the poorer classes.

(f) Inspections by School Nurse.

The School Nurse makes about 10 visits per annum to each School, and during the year made 4,666 examinations.

The number of children found unclean was 188, and in all cases conditions were remedied without legal proceedings being taken.

Arrangements have just been concluded with the Beverley Board of Guardians for the use of baths and the disinfection of clothing at their Institution. This has obviated the fixing of a bath at the Clinic as had been proposed.

Infectious Diseases.

Revised rules have been introduced for the exclusion of children suffering from infectious diseases, and also for the exclusion of contacts. There has been no epidemic during the year under review.

Following-up.

Records of defective children are kept by the Card System, and notices are sent to the parents or guardians in the first instance in all cases where they have not been present at the time of examination. The School Nurse visits the home when necessary, both to press upon the parents the necessity of treatment, and also to ascertain what has been done to remedy the defects.

Medical Treatment.

The work at the School Clinic has grown immensely since last year. The number of new cases seen there was 719, and the total attendances were 3,899. The Clinic is open daily at 9-30 a.m., and on Tuesdays and Fridays at 3 p.m. There is no doubt that it is now much appreciated both by the teachers and parents.

(a) Minor Ailments.

These have numbered 256, and have been of a very miscellaneous nature. Many are treated by the School Nurse alone, but all cases of any doubt are referred direct to the Medical Officer.

(b) Tonsils and Adenoids.

The Council has continued to subscribe five guineas to the Beverley Cottage Hospital for the treatment of these cases, and 15 cases were operated on there during the year. Up to the present no fees have been asked by the Medical Staff for this work, but it is not to be expected that this will continue indefinitely.

Two cases were treated privately.

(c) **Tuberculosis.**

All cases with definite symptoms are sent to the Tuberculosis Dispensary.

Non-pulmonary cases are sent to the Hospital.

(d) **Skin Diseases.**

These included 27 cases of scabies, 207 of impetigo, and 17 of ringworm.

The scabies cases are all attended to personally by the School Nurse, and arrangements have been made with the Beverley Board of Guardians for the bathing of the children, and for the disinfesting of their clothing. Much valuable time has been lost owing to this condition, but it is hoped that this will be avoided in the future by the more perfect arrangements that now exist.

Impetigo is a troublesome disease, and is much more prevalent amongst the poorer children. Daily attendance at the Clinic is essential for its effective treatment, and this has been very difficult to obtain in many cases. The results of treatment have been satisfactory.

Ringworm has to be treated by Iodine, as no facilities exist for X-Ray treatment.

(e) **External Eye Disease.**

53 cases were treated with satisfactory results at the Clinic.

(f) **Vision.**

The Council subscribes ten guineas a year to the Hull Royal Infirmary for the treatment of errors of vision. 31 cases were sent there, and in 23 cases glasses were prescribed. Two children were treated privately. Glasses were provided free to 11 children, and in a number of cases the fares of the child and parent were paid.

(g) **Ear Disease.**

60 cases received treatment at the Clinic. The treatment of these cases is very tedious, and one is confronted by a rooted objection in many instances on the part of the parent to the drying up of the discharge. I fear it will take many years to eradicate this mistaken idea.

(i) **Dental Defect.**

It is hoped during the present year to share the services of a Dental Surgeon with the County Council, and to commence the systematic inspection of all children. 109 children attended at the Clinic for extractions.

Co-operation of Parents.

The parents are duly notified by the Head Teachers of the date and time of the proposed examination, and are invited to be present. The number of parents present was 408 as compared with 255 in the previous year.

The attendance of parents at the Clinic is encouraged, and has been very pleasing. Many have brought their children there of their own accord.

Co-operation of Teachers.

The Head Teacher records the height and weight of the children before examination, and is present at all examinations where possible. Much valuable assistance has been rendered by teachers sending ailing children to the Clinic.

Co-operation of School Attendance Officer.

The School Attendance Officer visits the Clinic two or three times a week to compare notes with the School Nurse. All cases excluded from School by the School Medical Officer are notified to the Attendance Officer, and the latter notifies the Medical Officer of all children who are stated to be absent owing to medical reasons. In the absence of satisfactory medical certificates, the School Nurse visits the home to ascertain the cause of the absence.

H. L. MUNRO, M.D.,

School Medical Officer.

February 23rd, 1921.

TABLE I.
NUMBER OF CHILDREN INSPECTED 1st JANUARY, 1920, TO 31st DECEMBER, 1920.
A.—Routine Medical Inspection.

AGE	ENTRANTS						INTER-MEDIATE 8	LEAVERS					
	3	4	5	6	Other Ages	Total		12	13	14	Other Ages	Total	Grand Total
BOYS	18	51	81	30	5	185	146	90	20	..	..	110	441
GIRLS	17	39	47	27	17	147	98	60	16	..	..	76	321
TOTALS ...	35	90	128	57	22	332	244	150	36	..	..	186	762

B.—Special Inspections.

	Special Cases	Re-Examinations (i.e., No. of Children Re-Examined)
BOYS	365	32
GIRLS	354	17
TOTAL	719	49

C.—Total Number of Individual Children inspected by the Medical Officer, whether as Routine or Special Cases
(no Child being counted more than once in one Year).

No. of Individual Children inspected.
1481

TABLE II.

**RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL
INSPECTION IN 1920.**

Defect or Disease	Routine Inspections		Specials	
	Number referred for treatment	Number requiring to be kept under observation, but not referred for treatment	Number referred for treatment	Number requiring to be kept under observation, but not referred for treatment.
Malnutrition	10	20	..	..
Uncleanliness:				
Head	10	..	..	..
Body	19	..	..	..
SKIN.				
Ringworm:				
Head	1	..	13	..
Body .....	..	..	3	..
Scabies	3	..	24	..
Impetigo	12	..	195	..
Other Diseases	3	..	6	..
EYE.				
Blepharitis	2	..	33	..
Conjunctivitis	2	..	14	..
Corneal Ulcer	1	..	1	..
Defective Vision	20	10	11	..
Squint	4	..	..	..
EAR.				
Defective Hearing	9	..	11	..
Otitis Media	5	..	35	..
NOSE AND THROAT.				
Enlarged Tonsils	10	16	..	..
Adenoids	4	..	..	..
Enlarged Tonsils and Adenoids ..	12	..	..	..
Other conditions	2	..	..	..
Enlarged Cervical Glands (Non-Tubercular)	11	6	..	..
Defective Speech	2	4	..	..
HEART AND CIRCULATION.				
Heart Disease:				
Organic	2	2	..	..
Functional .....	..	..	..	..
Anæmia	3	..	..	..
LUNGS.				
Bronchitis	15	..	..	..
Other Non-Tubercular Diseases	..	..	16	..
TUBERCULOSIS.				
Pulmonary:				
Definite	2	..	..	..
Suspected	2	..	..	..
Non-Pulmonary:				
Glands	1	..	..	..
NERVOUS SYSTEM.				
Epilepsy	3	..	..	..
DEFORMITIES.				
Rickets	3	..	..	..
Spinal Curvature	3	..	..	..
Other Forms	3	..	..	..
Other Defects or Diseases	4	..	240	..

Number of Individual Children having defects which required treatment or to be kept under observation 843.

TABLE III.

NUMERICAL RETURN OF ALL EXCEPTIONAL CHILDREN IN THE
AREA IN 1920.

	Boys	Girls	Total
BLIND (including partially blind).			
Attending Public Elementary Schools .....	..	..	..
Attending Certified Schools for the Blind	1	..	1
Not at School .....	..	..	..
DEAF AND DUMB (including partially deaf).			
Attending Public Elementary Schools .....	..	1	1
Attending Certified Schools for the Deaf	1	..	1
Not at School .....	..	..	..
MENTALLY DEFICIENT.			
Feeble Minded—			
Attending Public Elementary Schools	2	3	5
Attending Certified Schools for Mentally Defective Children .....	..	..	..
Notified to the Local (Control) Authority during year	2	..	2
Not at School	2	..	2
Imbeciles—			
At School .....	..	..	..
Not at School .....	..	..	..
Notified to Local Control Authority .....	..	..	..
Idiots—			
Notified to Local Control Authority .....	..	..	..
EPILEPTICS.			
Attending Public Elementary Schools	1	..	1
Attending Certified Schools for Epileptics	1	..	1
Not at School	1	..	1
PHYSICALLY DEFECTIVE.			
Pulmonary Tuberculosis—			
Attending Public Elementary Schools .....	..	..	..
Attending Certified Schools for Physically Defective Children .....	..	..	..
Not at School	2	2	..
Crippling due to Tuberculosis—			
Attending Public Elementary Schools	4	1	5
Attending Certified Schools for Physically Defective Children .....	..	..	..
Not at School .....	..	..	..
Crippling due to cause other than Tuberculosis—			
Attending Public Elementary Schools .....	..	4	4
Attending Certified Schools for Physically Defective Children .....	..	..	..
Not at School .....	..	..	..
DULL OR BACKWARD.			
Retarded 2 years	18	7	25
Retarded 3 years .....	..	7	7

TABLE IV.

TREATMENT OF DEFECTS OF CHILDREN DURING 1920.

A.—Treatment of Minor Ailments.

Disease or Defect	Number of Children			
	Referred for Treatment	Treated		
		Under Local Education Authority's Scheme.	Otherwise	Total
SKIN—				
Ringworm-Head	14	14	...	14
Ringworm-Body	3	3	...	3
Scabies	27	27	...	27
Impetigo	207	207	...	207
Minor Injuries	16	16	...	16
Other skin disease ...	9	5	...	5
EAR DISEASE	60	60	...	60
EYE DISEASE (external and other)	53	53	...	53
MISCELLANEOUS	256	250	6	256

TABLE IV.—Continued.

B.—Treatment of Visual Defect.

Number of Children									
Referred for Refraction	Submitted to Refraction				For whom Glasses were Prescribed	For whom Glasses were Provided	Recommended for Treatment other than by Glasses	Received other Forms of Treatment	For whom no Treatment was considered necessary
	Under Local Education Authority's Scheme Clinic or Hospital	By Private Practitioner or Hospital	Otherwise	Total					
33	31	2	...	33	23	14 11 by L.A.	9	3	2

C.—Treatment of Defects of Nose and Throat.

Number of Children				
Referred for Treatment.	Received Operative Treatment			Received other Forms of Treatment
	Under Local Education Authority's Scheme—Clinic or Hospital	By Private Practitioner or Hospital	Total	
28	15	2	17	5

TABLE V.

SUMMARY OF TREATMENT OF DEFECTS AS SHOWN IN TABLE IV. (A, B, C, D AND F, BUT EXCLUDING E).

Disease or Defect.	Number of Children.			
	Referred for Treatment.	Treated.		
		Under Local Education Authority's Scheme.	Otherwise.	Total.
Minor Ailments - -	256	250	6	256
Visual Defects - -	33	31	2	33
Defects of nose and throat - - -	28	15	2	17
Dental Defects - -	234	109	10	119
Other Defects - -	329	329	...	329
Total - - -	880	734	20	754

TABLE VI.

**SUMMARY RELATING TO CHILDREN MEDICALLY
INSPECTED AT THE ROUTINE INSPECTIONS
DURING THE YEAR 1920.**

(1) The total number of children medically inspected at the routine inspections.	762
(2) The number of children in (1) suffering from—	
Malnutrition	30
Skin Disease	19
Defective Vision (including Squint)	34
Eye Disease	5
Defective Hearing	9
Ear Disease	5
Nose and Throat Disease	28
Enlarged Cervical Glands (non-tubercular)	17
Defective Speech	6
Dental Disease	234
Heart Disease—	
Organic	4
Functional .....	...
Anæmia	3
Lung Disease (non-tubercular)	15
Tuberculosis—	
Pulmonary { definite	2
{ suspected	2
Non-pulmonary	1
Disease of the Nervous System	3
Deformities	9
Other defects and diseases	4
(3) The number of children in (1) suffering from defects (other than uncleanness or defective clothing or foot-gear) who require to be kept under observation (but not referred for treatment).	58
(4) The number of children in (1) who were referred for treatment (excluding uncleanness, defective clothing, etc.).	251
(5) The number of children in (4) who received treatment for one or more defects (excluding uncleanness, defective clothing, etc.).	11

